TRICARE Europe Council

BG Hawley-Bowland

Commander, Europe Regional Medical Command

Command Surgeon, USAREUR/7A

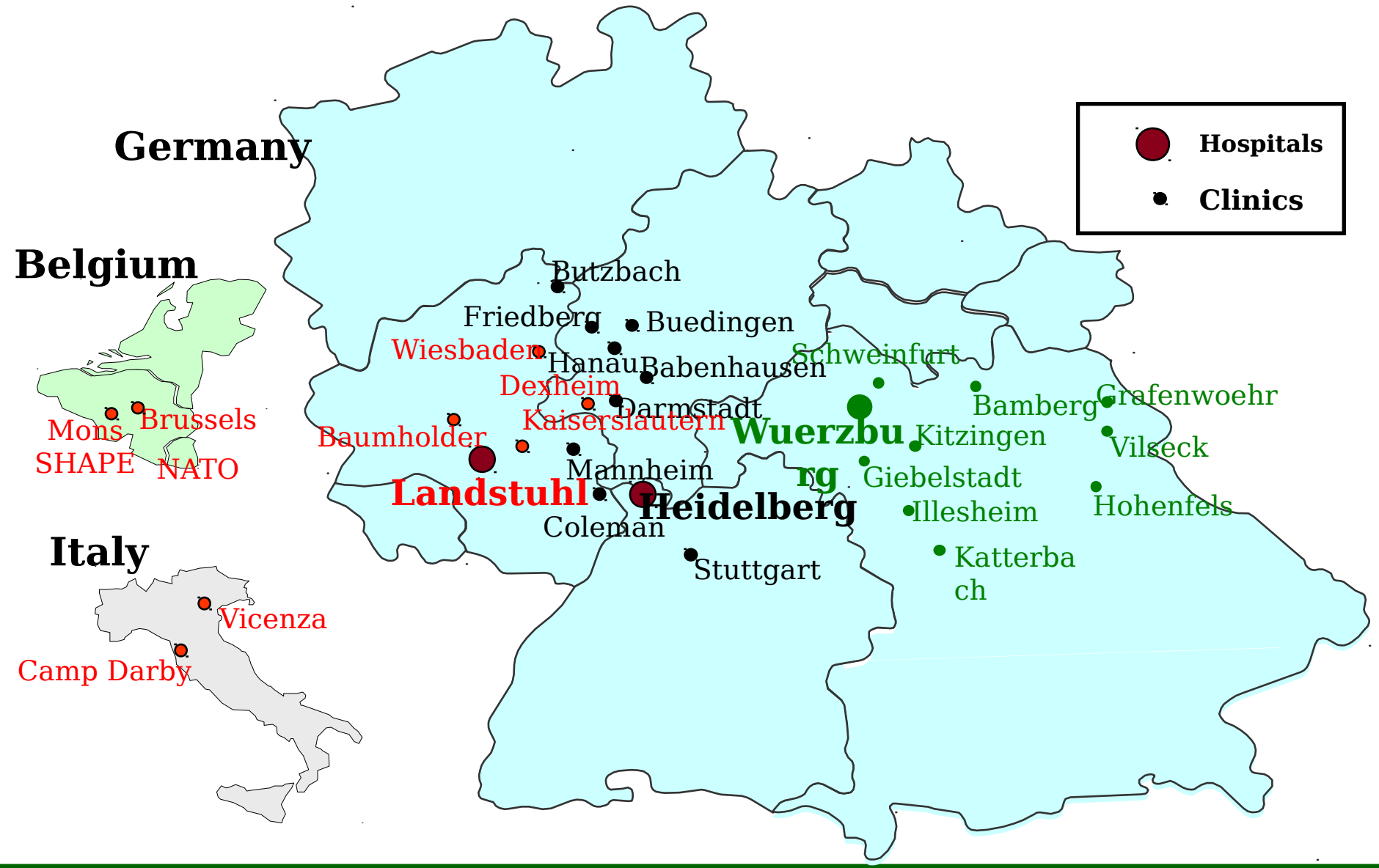
VISION

To be a compassionate, integrated, and responsive health care system; exceeding the requirements and expectations of the European Theater and its' communities.

Europe Regional Medical Command (ERMC) Mission

Ensure medical readiness for U.S. Forces in the USAREUR AOR by projecting and sustain a healthy, medically protected force, deploy a mission-ready medical force and managin promoting population health through acces quality health care services.

MEDICAL FACILITIES – Present



Total Beneficiaries in Europe

112,203 Active Duty

116,653 Active Family Mem

36,923 Retirees (12%)

30,000 Civilians

538 Others

296,317 Total

On Any Given USAREUR Day

3,174 MTF Outpt Visits

27 MTF Admissions

23 HN Admissions

537 HN Outpt Visits

7 MTF Births

4,400 Prescriptions

15 HN Births

5,200 Lab Tests

595 X-Rays

350 Dental Visits

6 STONs Materiel Shipped

150 Veterinary Visits

12 Research Projects

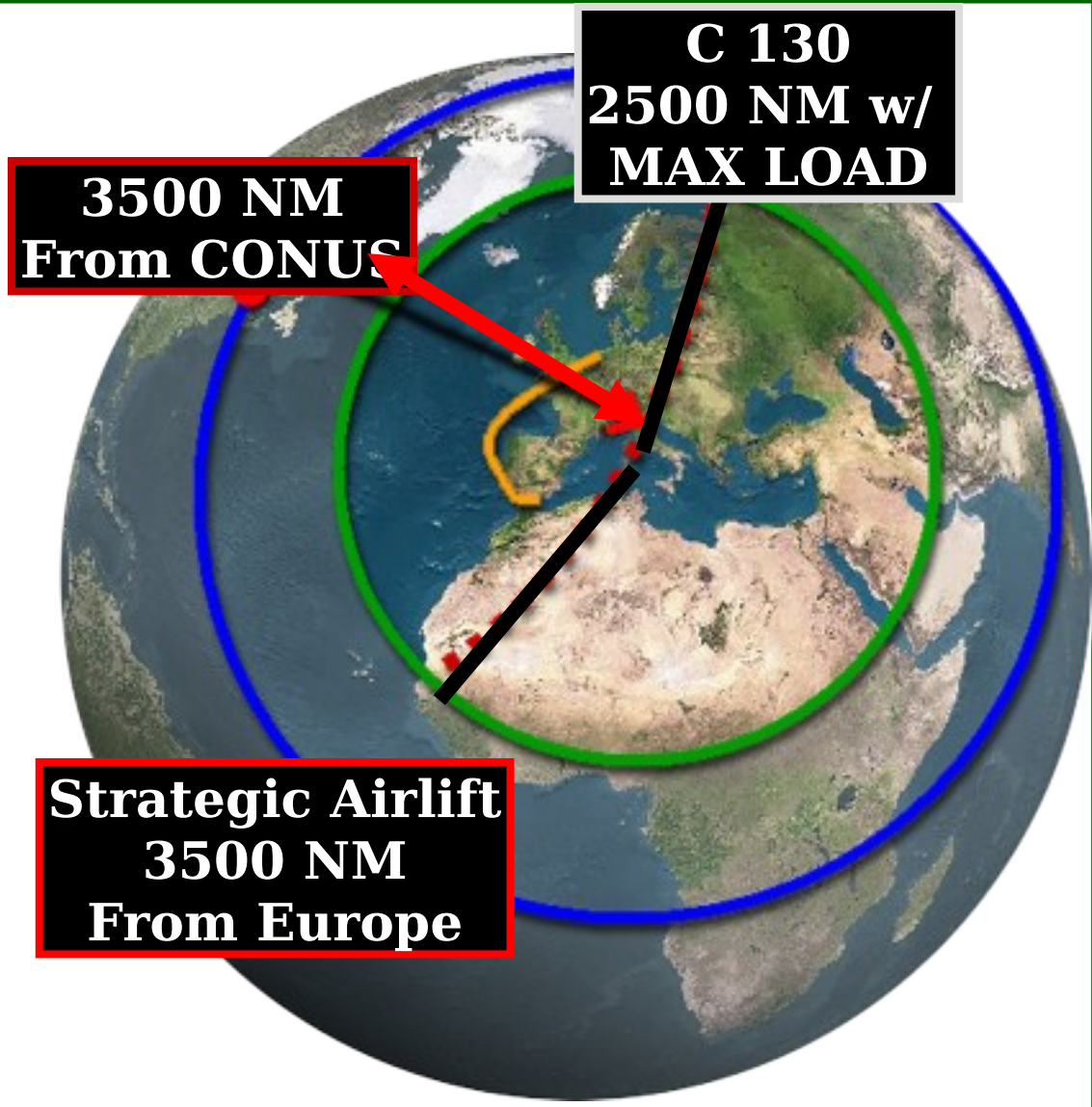
20 Environmental Studies

250 Medical Maintenance Work Orders

$754K/DAY TO PROVIDE MEDICAL CARE

Landstuhl Regional Medical Center

- *Rapid Medical Reaction Within Europe*
- *Rapid Medical Projection From Northern Europe*
- *Stable Health Service Support in Central Region*
- *Secure Evacuation Link To CONUS*
- *Theater Airlift Allows Immediate Crisis Response*
- *USAFE Bases and Mature European Rail and Port Infrastructure*

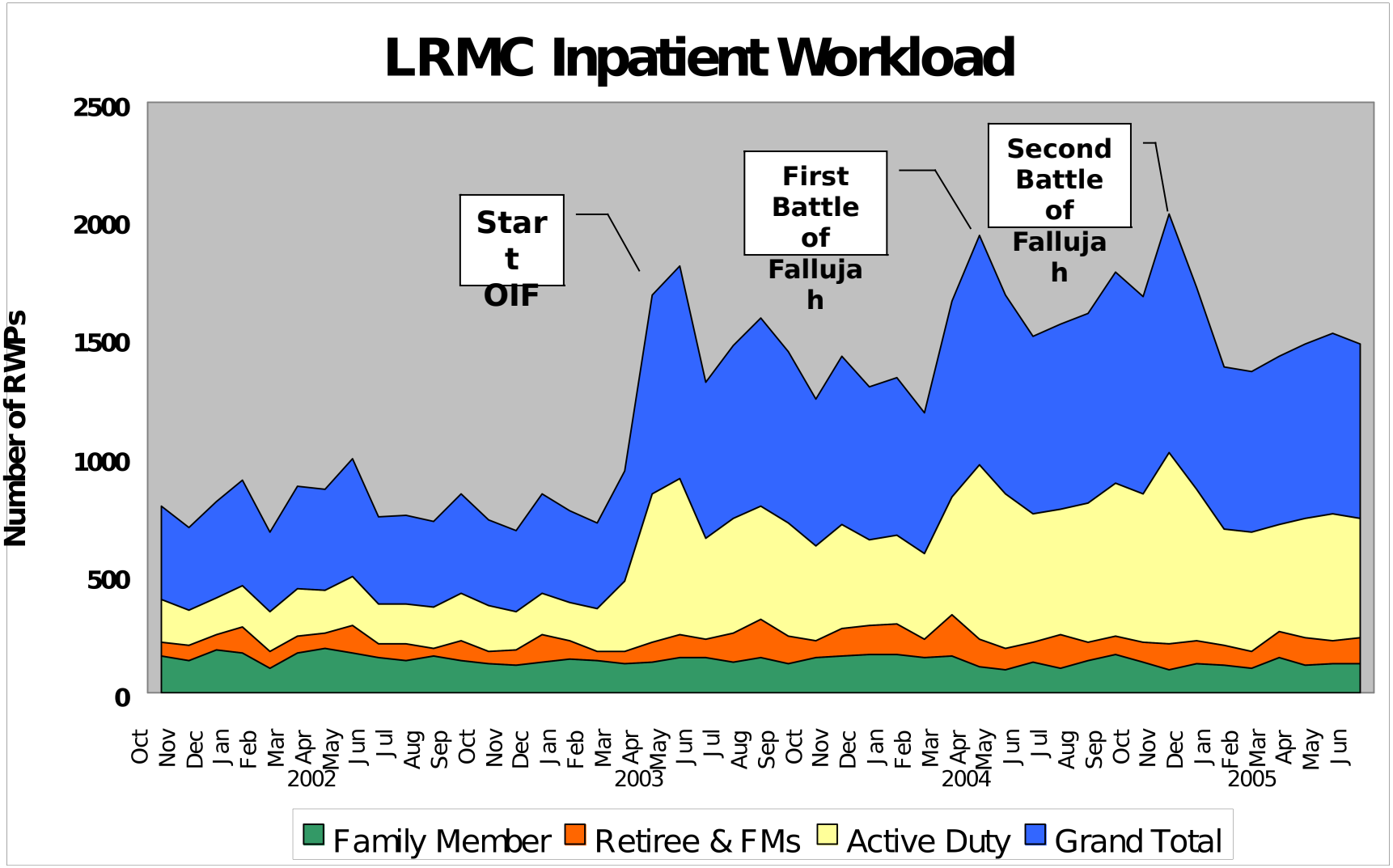


OIF/OEF Casualties Arrive at Ramstein en route to LRMC

Over 27,000 patient movements from OEF/OIF...

...Battle and Non-Battle Injuries

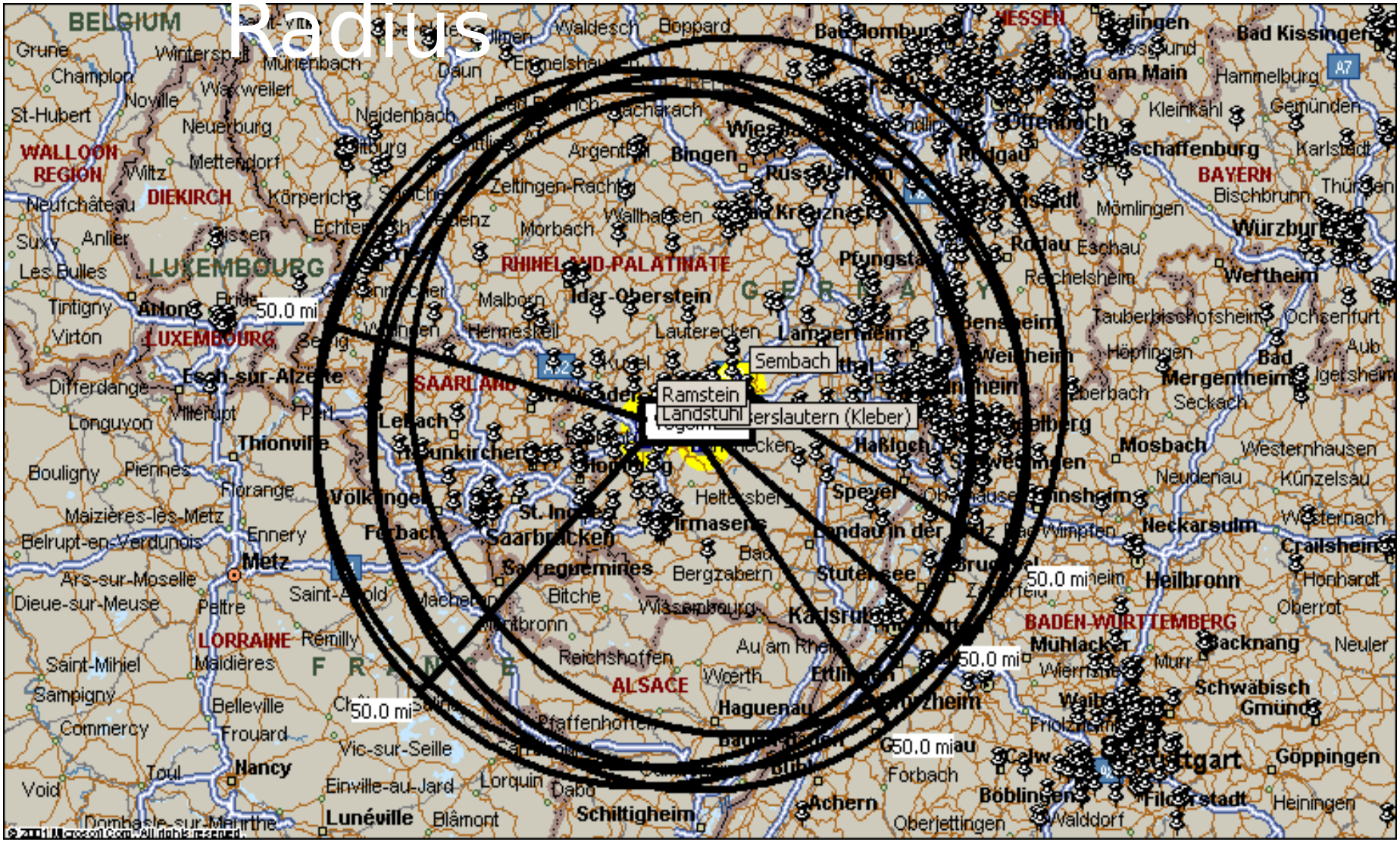
OEF/OIF Patients Arrived



Health Facility Projects

Kaiserslautern Military Community Health Care Services Integration

KMC Network 50 Mile Radius


Sembach
Ramstein
Landstuhl
50.0 mi
50.0 mi
50.0 mi
50.0 mi
BELGIUM
LUXEMBOURG
WALLOON REGION
DIEKIRCH
RHINELAND-PALATINATE
SAARLAND
LORRAINE
ALSACE
BADEN-WÜRTTEMBERG
BAYERN
HESSEN
Saarbrücken
Kaiserslautern
Metz
Nancy
Thionville
Trier
Mannheim
Karlsruhe
Stuttgart
Heilbronn
Pirmasens
Landau in der
Speyer
Haguenau
Wissembourg
Lunéville
Schiltigheim
Achern
Esch-sur-Alzette
Differdange
Longuyon
Bouligny
Maizières-lès-Metz
Belrupt-en-Verdunois
Ars-sur-Moselle
Dieue-sur-Meuse
Saint-Mihiel
Sampigny
Commercy
Void
Toul
Frouard
Belleville
Maldières
Remilly
Peltre
Ennery
Florange
Pierrepont
Virton
Arlon
Neufchâteau
Suxy
Les Bulles
Tintigny
Wiltz
Clervaux
Vianden
Echternach
Grevenmacher
Remich
Mondorf-les-Bains
Dudelange
Esch-sur-Sûre
Martelange
Bastogne
Marche-en-Famenne
Champion
Grune
St-Hubert
Neuerburg
Mettendorf
Körperich
Waxweiler
Prüm
Daun
Gerolstein
Bitburg
Wittlich
Bernkastel-Kues
Morbach
Zeltingen-Rachtig
Argenthal
Bingen
Rüdesheim
Kreuznach
Idar-Oberstein
Lauterecken
Hermeskeil
Malborn
Merzig
Saarlouis
Völklingen
Saarbrücken
Forbach
Sarreguemines
Bitche
Reichshoffen
Wörth
Haguenau
Pfaffenhoffen
Vic-sur-Seille
Einville-au-Jard
Lorquin
Dabo
Blâmont
Dombasle-sur-Meurthe
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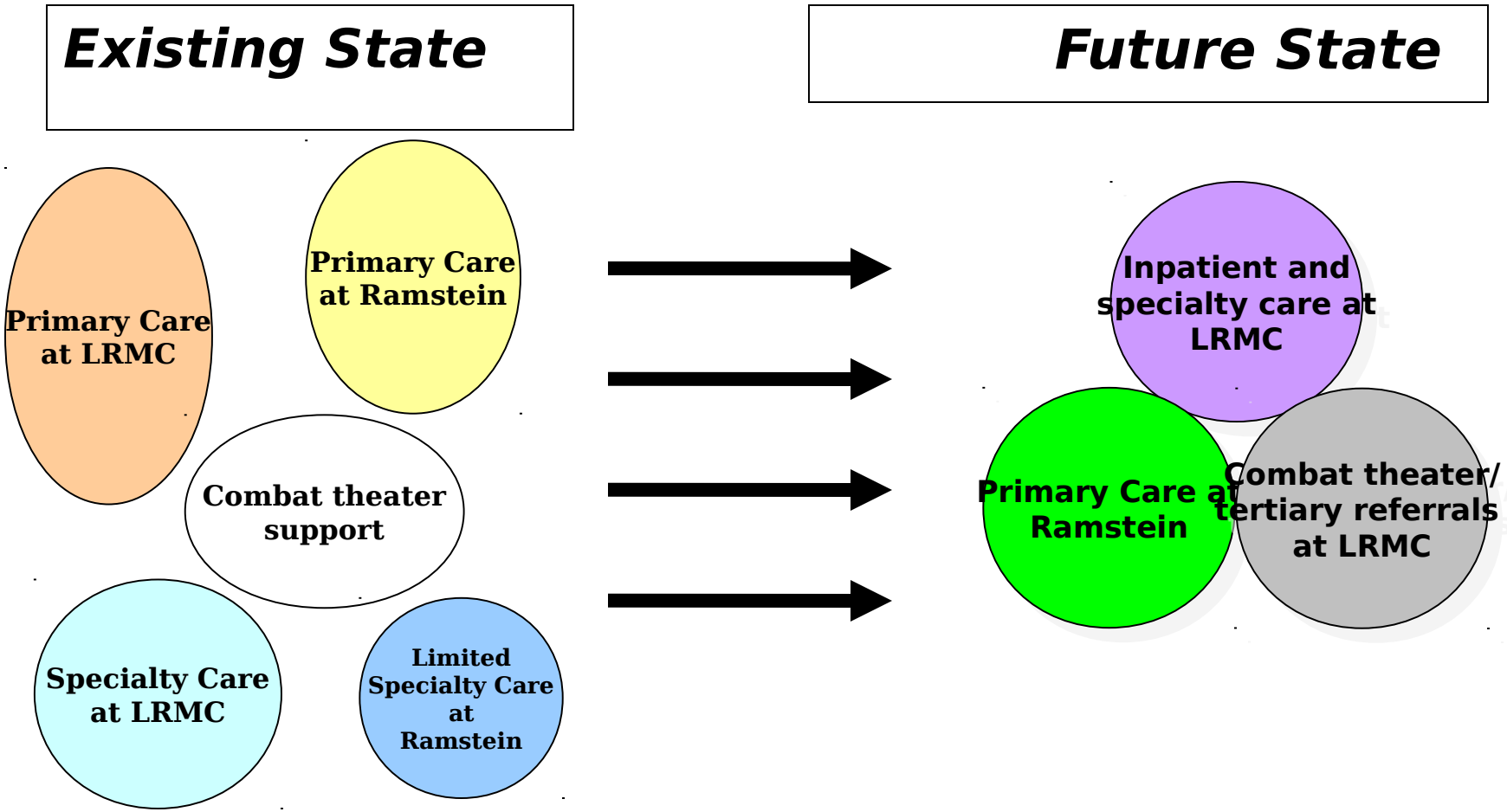
Belleville

Improving Access in the


Existing State
Future State
Primary Care at LRMC
Primary Care at Ramstein
Combat theater support
Specialty Care at LRMC
Limited Specialty Care at Ramstein
Inpatient and specialty care at LRMC
Primary Care at Ramstein
Combat theater/ tertiary referrals at LRMC

Revised ERMC Footprint

Joint Initiatives

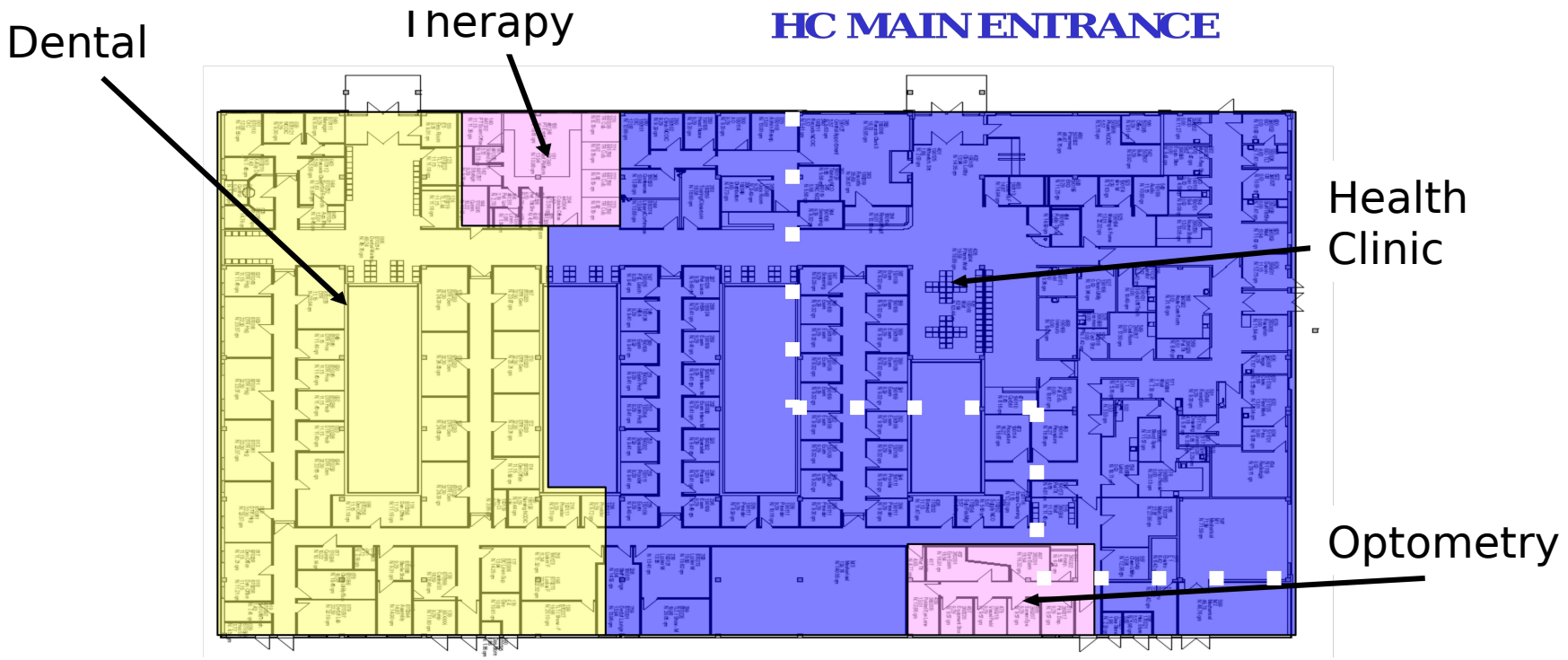
- **DoD is pushing for more medical integration. However, different funding and organization/manning between services make this challenging.**
- **Increased integration of services for the Kaiserslautern Military Community (KMC) underway.**
  - **Near-term integration:**
    - ✓ **Standardized formulary**
    - ✓ **Single access point Optometry**
    - ✓ **Central TRICARE referral office**
    - ✓ **Integrated Family Practice**
    - ✓ **Streamlined Physical Therapy**
    - ✓ **Consolidated Flight Medicine**
    - ✓ **Integrated Life Skills & Behavioral Health Services**
  - **Long-term integration:**
    - ✓ **All inpatient and behavioral health care services at LRMC – new second tower.**
    - ✓ **Consolidated outpatient and flight medicine services at Ramstein – new outpatient clinic.**

Grafenwoehr/Vilseck

Grafenwoehr Addition/Alteration Health/Dental Clinic (35% Complete)

Grafenwoehr Consolidated Health

Currently Under Construction



Grafenwoehr Clinic

- **Grafenwoehr Clinic Expansion Underway**
  - **Clinic growth will increase care capabilities and reduce the number of TRICARE referrals**
    - ✓ **Essentially a Super Clinic (Level II+)**
  - **New and/or expanded ancillary services include:**
    - ✓ **Laboratory**
    - ✓ **X-Ray**
    - ✓ **Physical Therapy**
    - ✓ **Pharmacy**
    - ✓ **Optometry**

Vilseck Health Clinic

Addition

Addition to Health Clinic (B-250)

- Add ten new right-sized exam rooms.
- Convert large office to two additional exam rooms.
- Seven former exam rooms convert to provider offices.

Net Result

- New exam rooms (16 total) are removed from heavily-trafficked main entrance and waiting areas.
- Eight private provider offices created (IAW DoD criteria).

Vicenza Expansion/Birthing Center

Breaking Groun
8 Dec 2004

Grand Opening
1 Apr 2005

Vicenza Expands Services

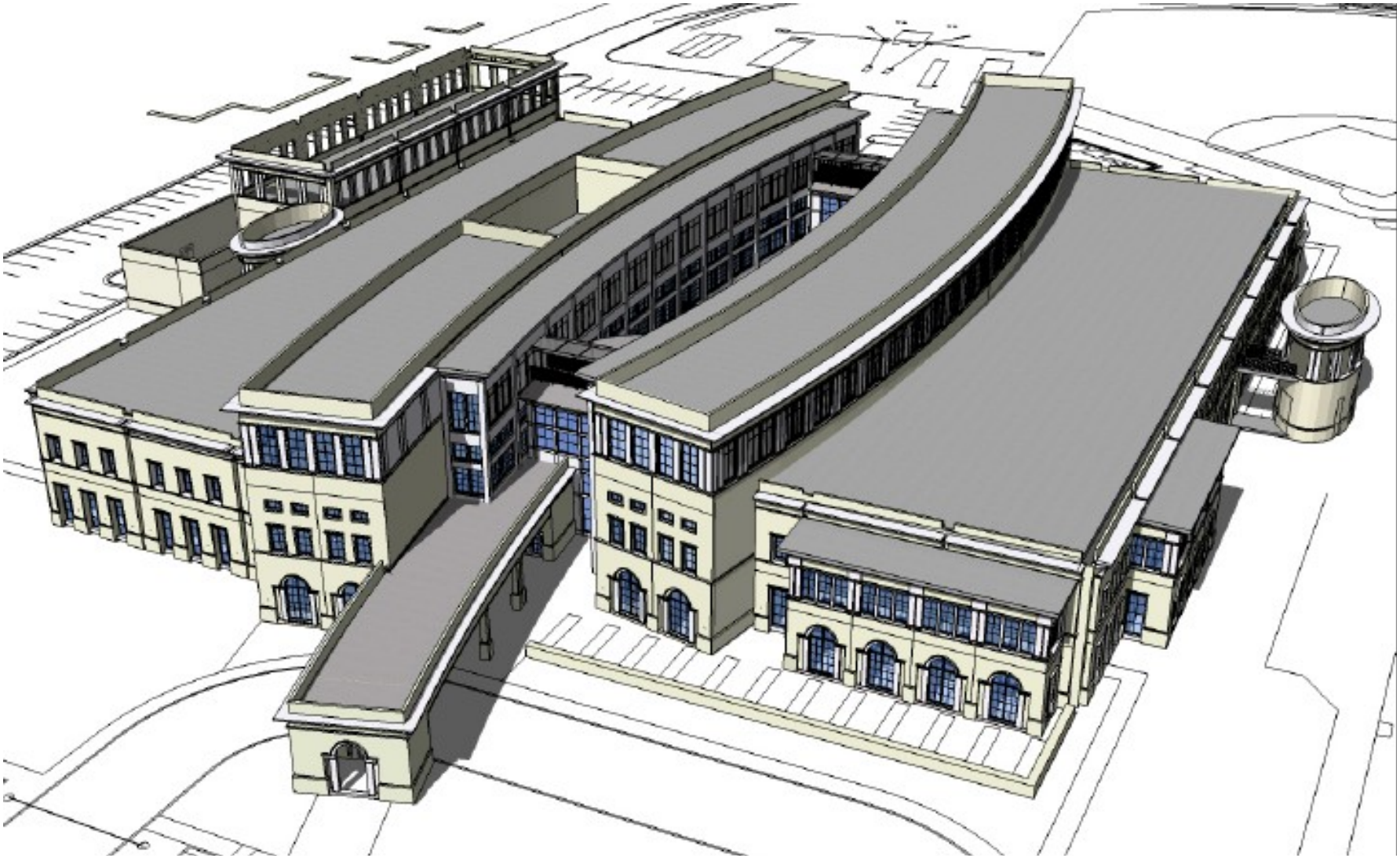
Ribbon Cutting - 1 April 2005

Dr. Frank V. Benincaso Mother and Infant Pavilion

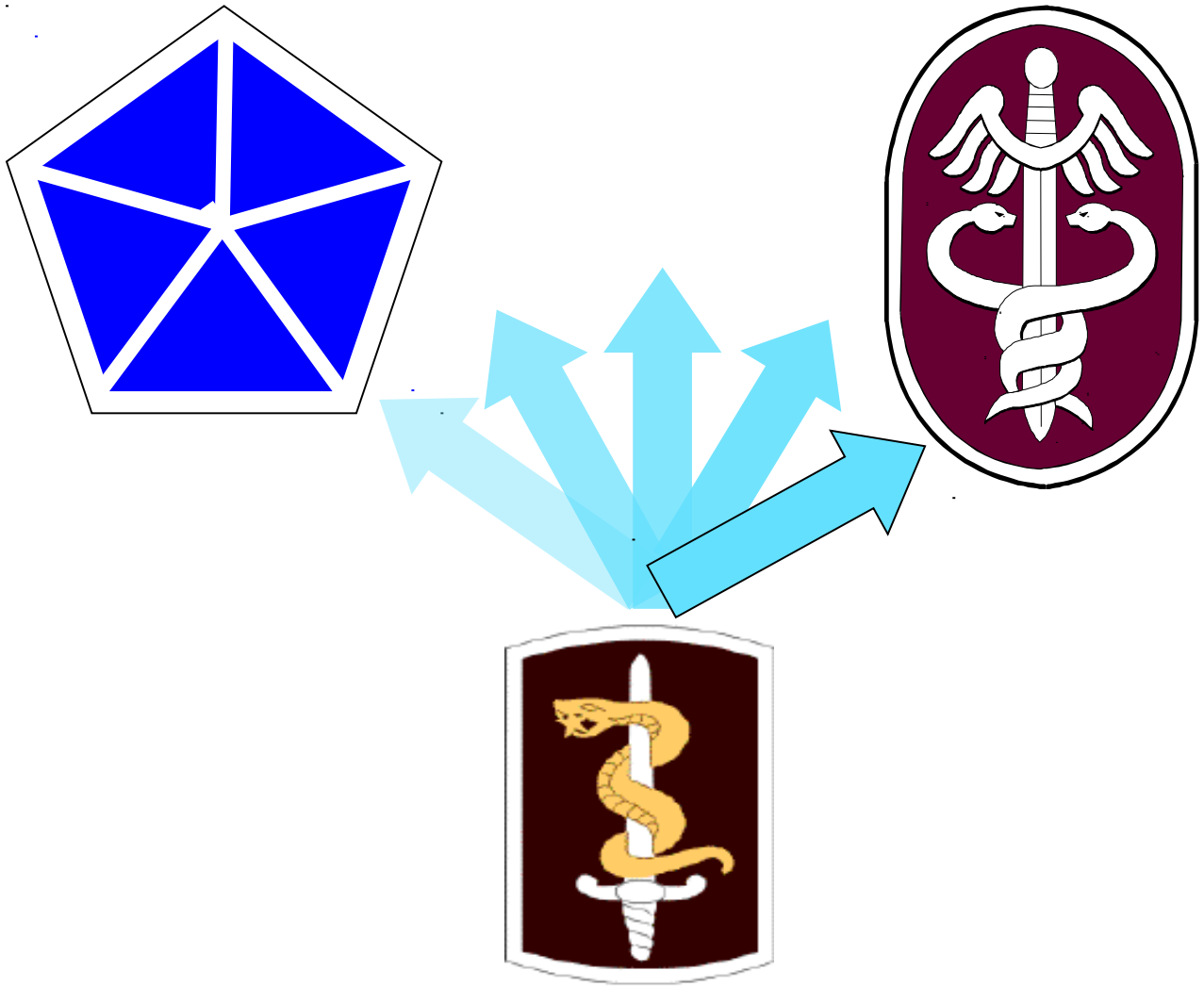
2x Operating Rooms **2x Recovery beds**

2x In-patient beds **2x LDRP beds**

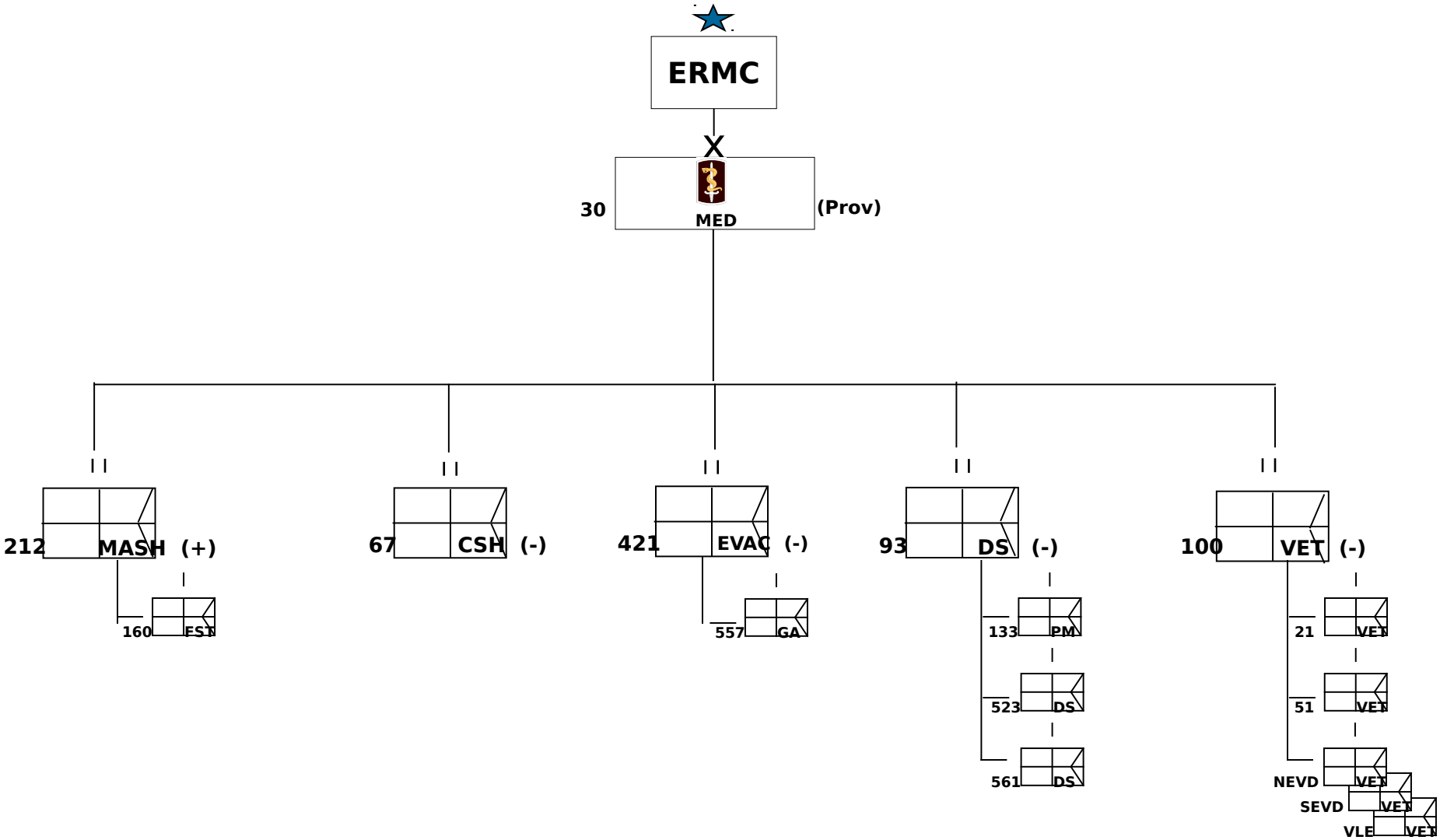
Vicenza Enhanced Health Services



C² Transition for 30th Med Bde



30 Med Bde (Rear) Task Org



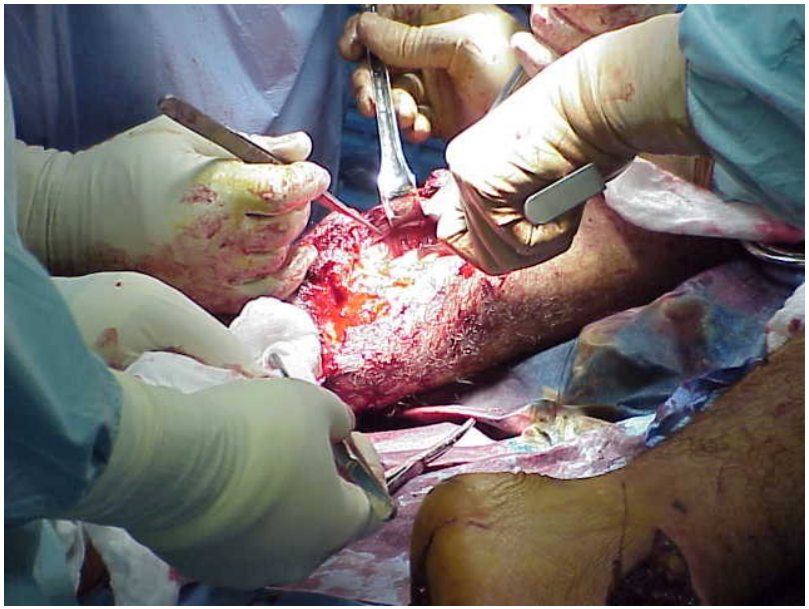
Medical Support Coordination Team

In January 2005, the 67th Comb Support Hospital (CSH) Return from 1-Year of Duty in Iraq

The 212th Mobile Army Surgical Hospital (MASH) provided medical support in Angola, Africa during MEDFLAG 2005

212th MASH
Kashmir Operations

Medical Support Coordination Team

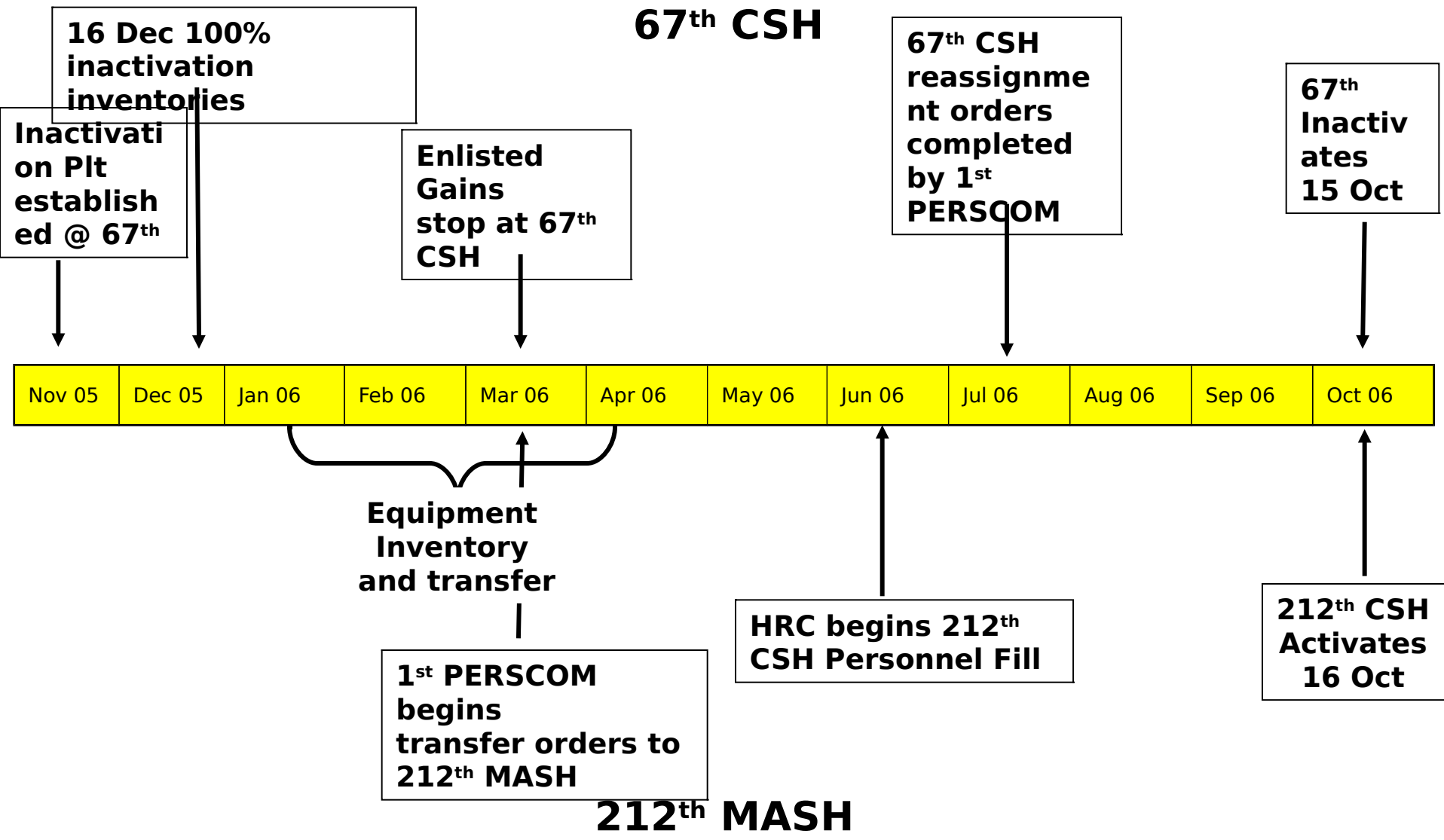


- The 212th MASH arrived in Pakistan on the 17 Oct 05 and began movement to Mussafarabad.

- Established level I and II capabilities on 24 Oct 05

- Establised level III on 26 Oct 05

67th CSH Inactivation and 212th MASH MRI Conversion



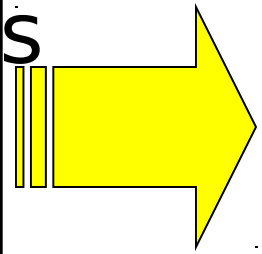
ERMC PRESENT/FUTURE

ERMC

2,522 Soldiers

TOE/30th MED

1,891 Soldiers



Blended HQs

TOE/TDA

HQs – 222 AD/RC

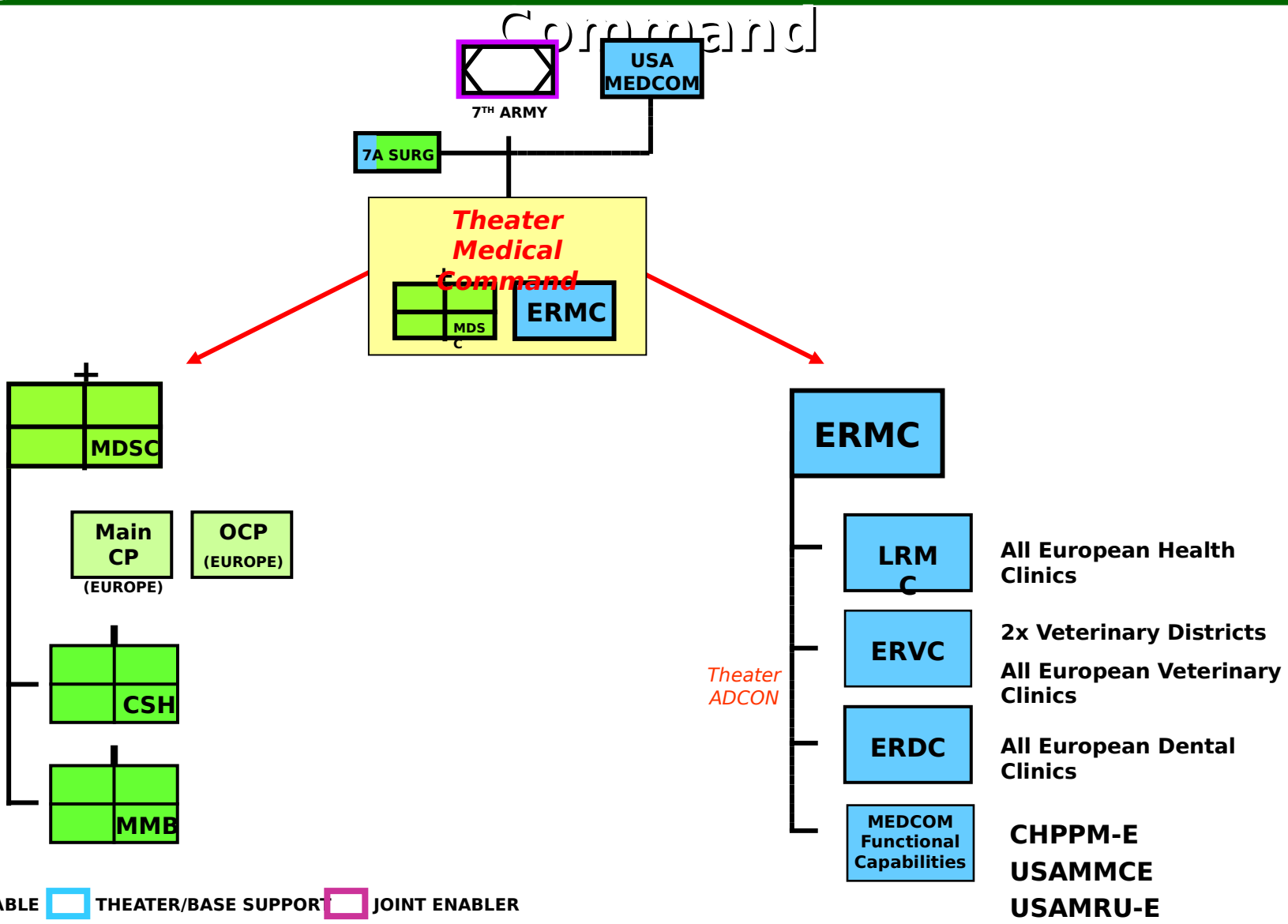
TDA – 1,295 Soldiers

TOE -- 799 Soldiers

TOTAL: 4,413

TOTAL: 2,316

Proposed Theater Medical Command



Transformation

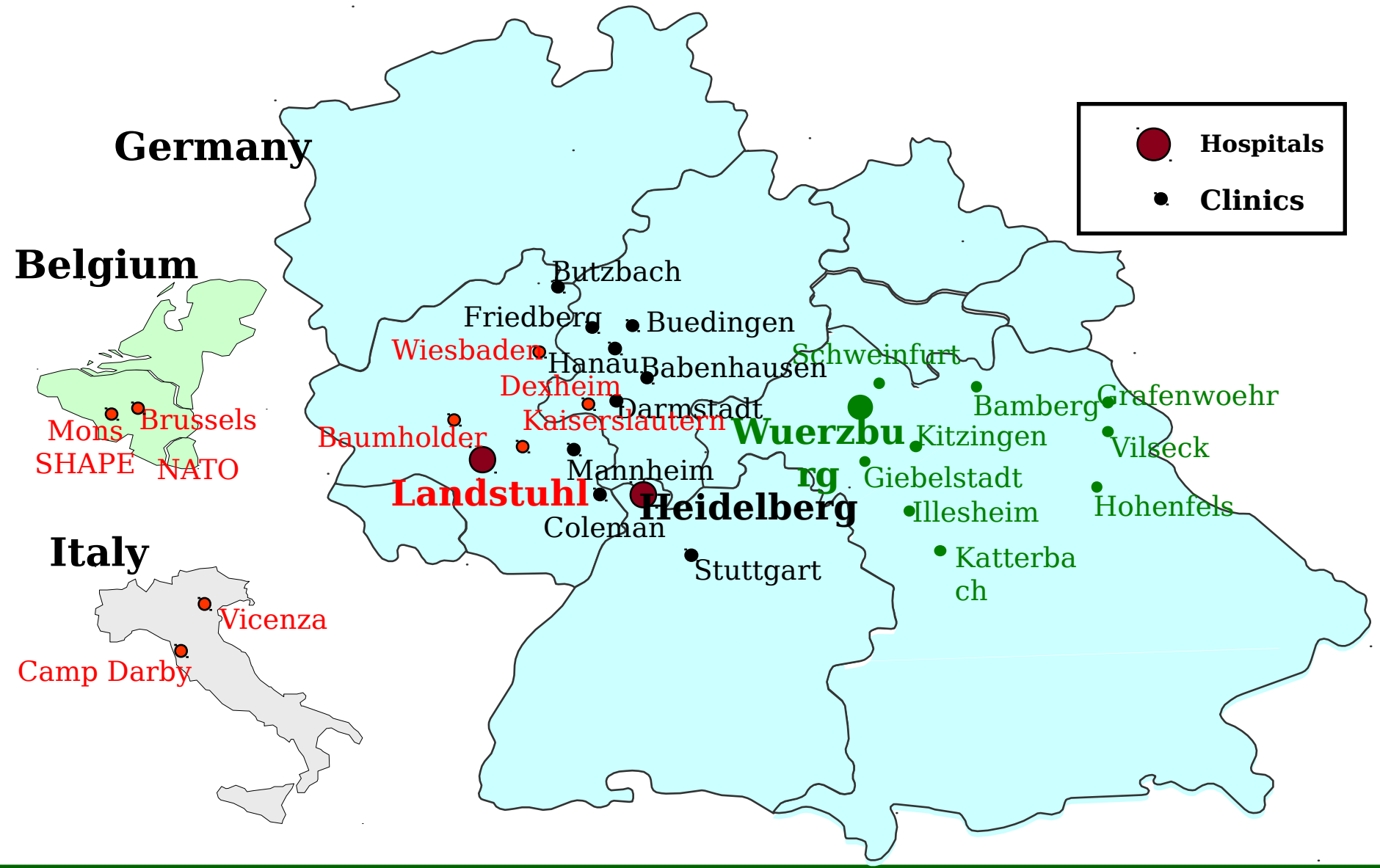
Summary

- **Our design provides the USAREUR Commander his Theater Medical Command design with a single medical POC.**
  - **Commands all deployable and theater-based support assets.**
  - **Serves as USAREUR & Task Force 5 Command Surgeon.**
  - **Provides continuity of effort.**
  - **Retains ADCON over all MEDCOM assets in theater.**
  - **Addresses mixed TDA / TO&E units - *Europe Regional Veterinary Command.***

- **Our design provides the right mix of capabilities to support USAREUR's tactical and garrison medical requirements.**

- **We are better postured for the next joint step.**

MEDICAL FACILITIES – Present

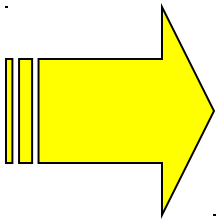


ERMC PRESENT/FUTURE

1xMEDCEN
LRMC

2xMEDDACs
WMEDDAC
HMEDDAC

27xHealth Clinics



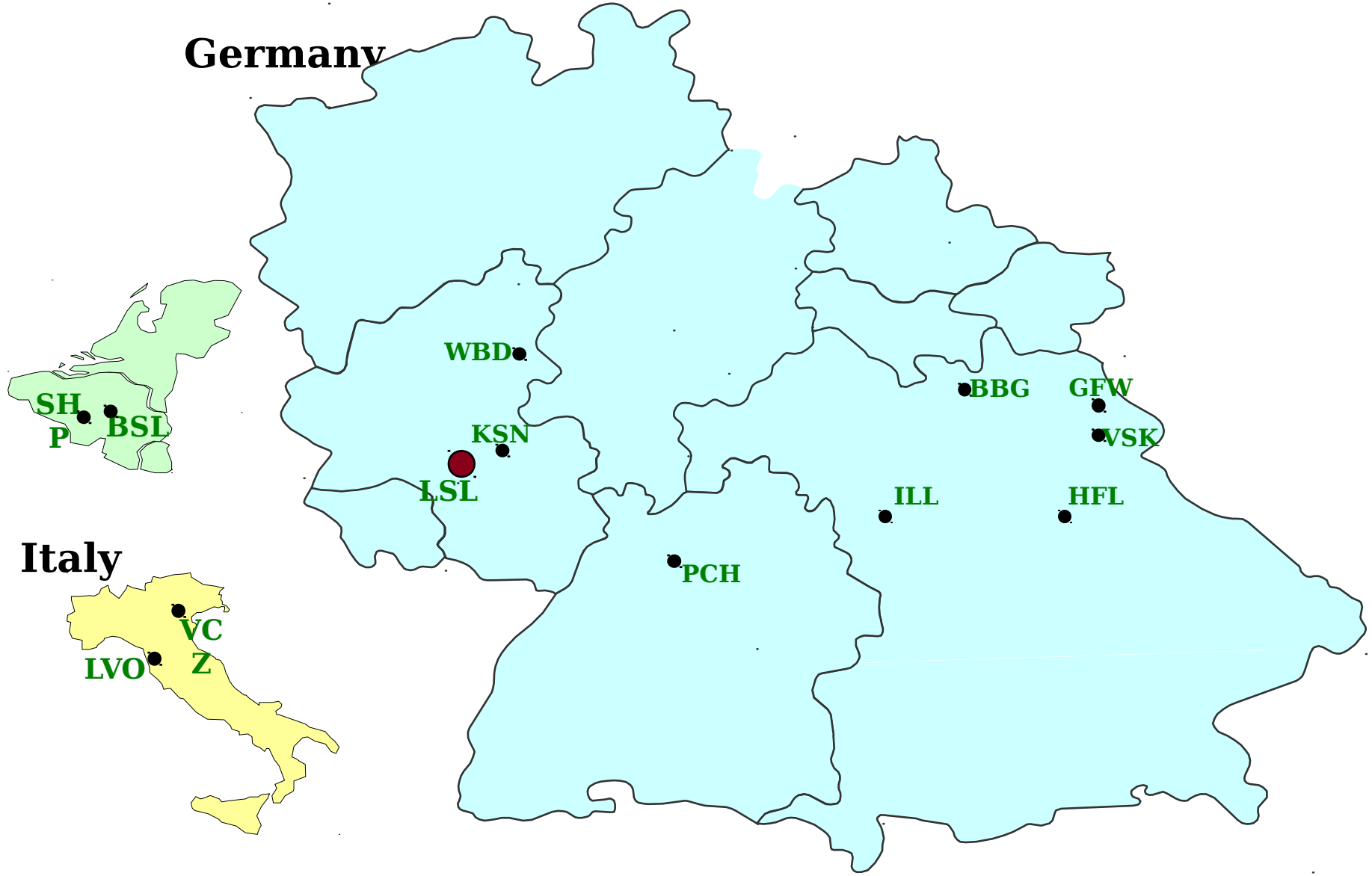
1xMEDCEN
LRMC

1xBirthing/Surgi CTR
(Vicenza)

1xSuper Clinic
(Grafenwoehr)

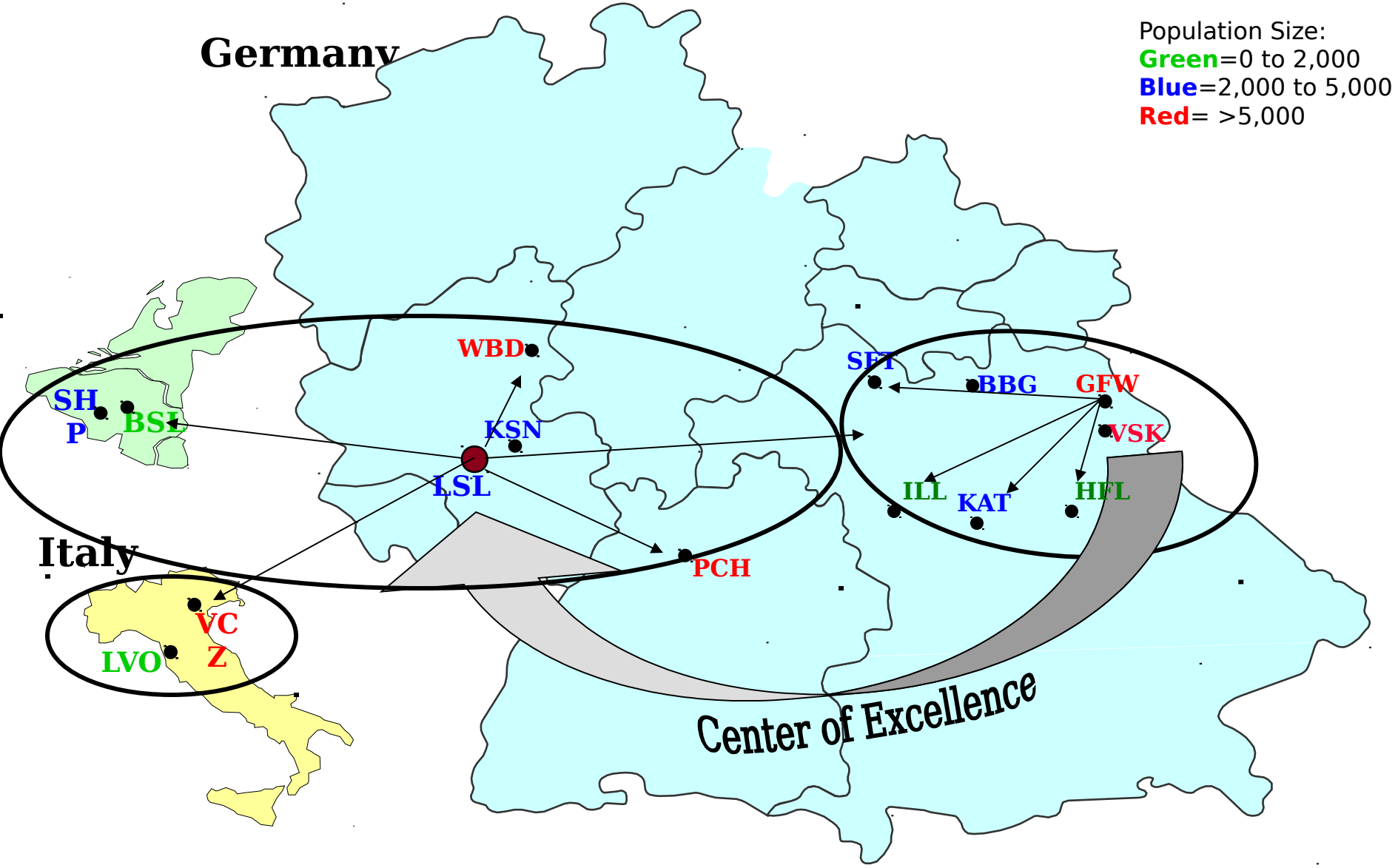
12xHealth Clinics

MEDICAL FACILITIES – Future



Hospital-Centric ⇒ Clinic-Centric

ERMC HUB AREAs in Europe – Future



Primary Specialties @ Circuit AREA

Internal Medicine
(Population Based)
Family Practice
Pediatrics
Psychiatry
Optometry
Audiology
Physical Therapy

Each Circuit Area Will Have Primary Specialty Circuit Riders Within Their Area

Each Circuit Area Will Standardized Clinic Equipment To Facilitate Transition Prior To Hospital's Closing

Pediatrics Secondary To European
Not Meeting U.S. Screening And Immunization Standards

U.S. Standard For Psychiatry Not Available On European Economy

Hot Rocks =

- New Command Structure: ERMC →MDSC
- TDA mission → Clinic-centric focus
  - Closures; growth; circuits
  - Kaiserslautern integration
- TOE mission → 30th Med Bde
  - Inactivation of 67th CSH
  - MRI of 212th MASH + train and validate

QUESTIONS?